

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. **10824564**

FILING DATE **4-15-04**

APPLICANT(S)

**CLAIMS**

	AS FILED		ADJUSTED ASSIGNMENT		ADJUSTED ASSIGNMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4		1				
5		1				
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TOTAL IND.	3					
TOTAL DEP.	7					
TOTAL CLAIMS	10					

	IND	DEP	IND	DEP	IND	DEP
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